



WORLD HEALTH ORGANIZATION

FIFTY-THIRD WORLD HEALTH ASSEMBLY
Provisional agenda item 2

A53/2
22 March 2000

Reports of the Executive Board on its 104th and 105th sessions

Report by the Chairman

1. The Executive Board held its 104th session on 26 May 1999, and its 105th session from 24 to 28 January 2000. In addition its members participated in a retreat (Lyons, France) from 20 to 22 October 1999.

104th SESSION (26 May 1999)

2. The report on **research strategy and mechanisms for cooperation** generated a stimulating debate that concluded with an agreement to give further consideration to the issues raised. As a result a report was prepared for submission to the Board at its 105th session that made a series of proposals on specific matters relating to WHO collaborating centres, expert committees and other mechanisms for generating advice (see paragraph 19).

3. A report requested by the Executive Board in decision EB102(2) introduced a draft **policy framework on extrabudgetary resources**. Discussions raised many issues that would be taken into account in the preparation of a revised draft policy for submission to the Board at its 105th session.

4. The Board adopted resolution EB104.R1 **confirming amendments to the Financial Rules**. The amendments incorporated the mandate of the Office of Internal Audit and Oversight in the Financial Rules. All systems, processes, operations, functions and activities within the Organization will come within the purview of the Office for review, evaluation and supervision.

RETREAT (20 to 22 October 1999)

5. Nearly all the members of the Board gathered in Lyons, France, for a retreat. Three policy issues were presented: the corporate strategy, programme budget priorities for the financial period 2002-2003, and working in and with countries. Four updates on technical and health matters were presented: eradication of poliomyelitis, the framework convention on tobacco control, the revised drug strategy and destruction of variola virus stocks. (Reports on the first three were subsequently submitted to the Board at its 105th session.) The WHO Advisory Committee on Variola Virus Research met for the first time from 6 to 9 December 1999. The other major issue was the terms of reference of the Programme Development Committee (PDC) and the Administration, Budget and Finance Committee (ABFC). Options would be submitted to the Board at its January session (see paragraph 9).

105th SESSION (24 to 28 January 2000)

6. The first day of the session was devoted to presentations – on a **strategic agenda for the WHO Secretariat**, from the Director-General, and on **trends and challenges in world health**. The Board endorsed the directions set out by the Director-General and the concept and work on the corporate strategy.

7. Continuing with efforts to reform the **format of the Health Assembly**, the Board envisaged that the Fifty-third World Health Assembly would have a shortened plenary meeting for the general discussion, for which it encouraged contributions in the form of group or regional statements. The **round tables** will continue, with the theme of major challenges to health systems (decision EB105(4)).

8. The Board commended the work carried out so far to revise the **Financial Regulations** of the Organization and decided to set up a working group in order to consider further the proposed new regulations (decision EB105(7)). This group would report to ABFC at its meeting in May, which in turn would report to the Fifty-third World Health Assembly.

9. The Board noted the report of the first meeting of the **Audit Committee**, most of whose work had centred on a review of its **terms of reference**. It then considered the options presented by the Chairman on the terms of reference of **PDC** and **ABFC** and agreed that the Chairmen of these two committees, of the Audit Committee and of the Executive Board should meet to discuss the terms of reference of all three committees.

10. In line with the recommendations of ABFC and PDC, the Board noted the reports on **implementation of budget resolutions** (resolutions EB103.R6 and WHA52.20), including on **resource mobilization, efficiency savings, and evaluation of management support units**. The Board needed to be informed of implementation of measures to introduce a fully integrated system for planning, budgeting, monitoring and evaluation, requesting a further report for its 107th session in January 2001, and of development of standard business rules and procedures. It endorsed policy guidelines on resource mobilization (decision EB105(2)). It also agreed to the **transfer** of some US\$ 38 million for activities related to health systems **from Appropriation Section 3** (Health systems and community health, to be renamed Family and community health) **to Section 7** (Evidence and information for policy) (resolution EB105.R5). This reflected an organizational change, the funds being used for the same purpose as originally approved.

11. The Director-General assured the Board that the principles of resolution WHA51.31 on **regular budget allocations to the regions** were being taken into account in the preparatory work for the programme budget for the financial period 2002-2003.

12. Several other **financial and management matters** were dealt with. With regard to **Member States in arrears** in the payment of their assessed contributions the Board urged that every effort should be made to improve the situation. It adopted resolution EB105.R9 recommending the Health Assembly to adopt a resolution on the specific uses of **Casual Income** (a term for which “miscellaneous income” was preferred and which would be covered in the revision of the Financial Regulations – see paragraph 8). This included US\$ 10 million to commence replenishment of the Working Capital Fund. It further adopted resolution EB105.R10 recommending that the Health Assembly should authorize financing of US\$ 2.1 million from the **Real Estate Fund** for new telephone exchanges. The Board noted the new, more effective structure for the **Voluntary Fund for Health Promotion**, which aligned it to the structure of the programme budget and which had been implemented at the beginning of the year. It also confirmed **amendments to the Staff Rules**

concerning salary scales and staff assessment rates (resolution EB105.R13), and adopted resolution EB105.R14 recommending to the Health Assembly a draft resolution on the **remuneration of staff in ungraded posts** and of the Director-General.

13. The Board noted the five reports of the **Joint Inspection Unit** with WHO's comments thereon and the recommendations made by ABFC. The latter asked for further consultations between the Unit and WHO and for relevant proposals to be submitted to the Board at its 106th session.

14. Discussion on **regional committees and regional conventions** revealed that most members of the Board opposed the proposal to provide for a general authorization to regional committees to adopt regional conventions. The Board agreed to take an ad hoc approach, whereby authorization would be sought from the Health Assembly on a case-by-case basis. On the other hand, the Board adopted resolution EB105.R15 recommending the Health Assembly to authorize the Director-General to deposit a formal confirmation of the 1986 Vienna Convention on the Law of Treaties between States and International Organizations or between International Organizations.

15. The Board noted the annual report on **human resources**, which had been considered and recommended by ABFC. For the future, the Committee asked for more analysis of the data on the work force and a summary of actions taken to adapt policies on human resources to the changing needs and priorities of the Organization. In addition the Board took due note of the comments of the representative of the WHO staff associations.

16. Dr Ebrahim Malick Samba was reappointed as **Regional Director for Africa** and Dr Marc Danzon was appointed as **Regional Director for Europe**, both for five-year terms as from 1 February 2000.

17. After discussion, the Board noted the reports on **collaboration within the United Nations system and with other intergovernmental organizations**, understanding that a separate report to the Fifty-third World Health Assembly would give more details of WHO's collaboration with organizations such as the World Bank and WTO. The timing of the next meeting of the WHO/UNICEF/UNFPA Coordinating Committee on Health, scheduled for early 2001, would take into account the calendar of the Board's sessions.

18. In discussing **public-private partnerships for health** the Board endorsed the initial decision of the Director-General to appoint two staff members as representatives to the board of the Medicines for Malaria Venture (decision EB105(1)).

19. Noting that the designation of **WHO collaborating centres** should reflect the needs of WHO rather than those of the centres, the Board adopted resolution EB105.R7 on revised criteria, principles and procedures regarding such centres, and approved the immediate application of the amendments to the Regulations for Study and Scientific Groups, Collaborating Institutions and other Mechanisms of Collaboration. The Organization would regularly review the status of collaborating centres. The Board also adopted resolution EB105.R8 recommending that the Fifty-third World Health Assembly should approve amendments to the **Regulations for Expert Advisory Panels and Committees**.

20. At the Fifty-second World Health Assembly, a substantive debate took place on language diversity within the Secretariat and in WHO publications. The debate concluded with neither a decision nor a resolution.¹ After this exchange of views, the Director-General submitted to the

¹ See document WHA52/1999/REC/3, summary records of the seventh and eighth meetings of Committee B.

Executive Board, at its 105th session, document EB105/20, entitled “**Reaching out to the largest audience: languages for communication in WHO**”. In her opening statement, the Director-General informed the members of the Board of a number of decisions she intended to take. She vigorously asserted that language diversity was a quality, a sign of diversity and a source of different cultural expression, and that health, which is as diverse as individuals and communities, could not be expressed in only one language.

21. In resolution EB105.R6, the Executive Board commended the measures announced by the Director-General, and in particular the return to full reimbursement of language courses for staff, the enriching of the WHO Internet site, the publication of the *Bulletin of the World Health Organization* in a larger number of languages, the expansion of interpretation services at technical meetings and the appointment of a senior staff member as coordinator of those measures. The Board also called on the Director-General to consider the publication of *The world health report* in a larger number of languages.

22. On 15 February 2000 the Director-General appointed a coordinator for language diversity. The Coordinator initiated a dialogue with representatives at Geneva of the Arabic-, Portuguese- and Spanish-speaking Member States, with the Russian Federation and China, and with the *Organisation internationale de la Francophonie*, in order to gather their suggestions on the improvements required and their views on the progress made.

23. Full reimbursement of language training for staff in the six official languages and in Portuguese was restored with immediate effect. The working group responsible for developing the Internet site decided to expand the site’s contents as much as possible by systematically providing the information available in languages other than English, and reorganizing the home page to offer it initially in three languages, and later in a larger number.

24. WHO encourages publishing houses, scientific institutions and nongovernmental organizations to translate its documents and to disseminate them in a considerable number of languages. At present, WHO publications are available in over 60 languages. On average, between 1989 and 1999, approximately 100 publications were translated each year under licence, and all efforts are being made to expand still further the network of partner institutions in order to reach a larger audience.

25. In 2000 *The world health report* will be published in the six official languages, if possible simultaneously in Arabic, English, French and Spanish, and later in Chinese and Russian. The most satisfactory means of ensuring respect for language specificity in the *Bulletin of the World Health Organization* is still under study.

26. In the sphere of relations with the press, a special effort has been made towards radio stations broadcasting in French in the developing countries. WHO signed a contract with an independent producer to make available to them, each month, and free of charge, material suitable for broadcasting under the generic title “*Destination santé*”. WHO is also putting the finishing touches to a specialized television information programme on health, produced in partnership. The programme will be produced under contract by an independent producer and will broadcast in six languages (Arabic, Chinese, English, French, Portuguese and Spanish), information being provided by WHO, other organizations of the United Nations system dealing with health, and certain institutions such as the International Committee of the Red Cross.

TECHNICAL AND HEALTH MATTERS

27. The Board noted the reports related to **tobacco** (that of the first meeting of the working group on the framework convention on tobacco control and the Director-General's biennial report on the Tobacco Free Initiative). The second meeting of the working group in late March 2000 would look at the proposed draft elements of three possible protocols (on advertising and sponsorship, smuggling of tobacco and treatment of tobacco dependence). A prenegotiation document would be ready for the Fifty-third World Health Assembly.

28. The Board considered the report on the **Stop Tuberculosis Initiative**, and adopted resolution EB105.R11 recommending to the Fifty-third World Health Assembly adoption of a series of measures to accelerate tuberculosis control.

29. The Board adopted resolution EB105.R4 on **the Global Alliance for Vaccines and Immunization** (GAVI), recommending that the Fifty-third World Health Assembly should endorse its objectives. With regard to the potential for confusion between GAVI and the Global Polio Eradication Initiative, interventions needed to be carefully coordinated and timed, and the Board was assured that the presence of WHO on the board of GAVI would ensure that there was no conflict. The Board appealed to Member States to provide extra money for GAVI.

30. The lively discussion on the supplementary agenda item on **a global strategy for the prevention and control of noncommunicable diseases** included the offer that China could serve as a pilot for the global strategy. The Board adopted resolution EB105.R12 recommending to the Fifty-third World Health Assembly adoption of measures for strengthening prevention and control.

31. The Board welcomed the priority that the Director-General was giving to **food safety**. After extensive discussion, it adopted resolution EB105.R16 recommending to the Fifty-third World Health Assembly adoption of a number of measures for improving food safety. The Board further suggested that the Codex Alimentarius Commission, increased support for which was specifically mentioned in the resolution, should be invited to give a presentation at a future session of the Board on its aims and functions in order to broaden members' knowledge of its work.

32. Resolution EB105.R17 on **HIV/AIDS** recommends to the Fifty-third World Health Assembly adoption of many actions to strengthen, *inter alia*, care and prevention on the part of Member States and of the Director-General.

33. The Board adopted both decision EB105(12) and resolution EB105.R18 on **collaboration with nongovernmental organizations**. It resolved to establish official relations with three nongovernmental organizations and to discontinue relations with six others.

34. Lastly, the Board took note of all sections of the report on the **implementation of previous decisions and resolutions**. The matters covered included the revised drug strategy, health promotion, infant and young child nutrition, cloning in human health, and eradication of poliomyelitis.

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